United States Postal Service

Postage Statement — First-Class Mail
Postage Affixed

Post Office: Note Mail Arrival Time

Mailer Information

Permit Holder's Name and Address and Email Address If Any	Telephone	Name and Address of Mailing Agent *(If other than permit holder)*	Telephone	Name and Address of Individual or Organization for Which Mailing Is Prepared *(If other than permit holder)*
Dun & Bradstreet No. _____		Dun & Bradstreet No. _____		Dun & Bradstreet No. _____

Mailing Information

Post Office of Mailing	Processing Category *(DMM C050)* ☐ Letters ☐ Flats	Mailing Date	Statement Seq. No.	No. of Containers
Permit No. ☐ Meter Postage ☐ Precanceled Stamps	☐ Automation Flats *(DMM C820)* ☐ Parcels	Weight of a Single Piece 0 . ___ ___ ___ ___ pound	Total Pieces	No. of pieces with Repositionable Notes Attached *(DMM C810.7)*:

For Mail Enclosed Within Another Class
☐ Periodicals ☐ Standard Mail ☐ Bound Printed Matter ☐ Library Mail ☐ Media Mail ☐ Parcel Post

Total Weight

| For Automation Rate Pieces, Enter Date of Address Matching and Coding *(DMM A950.3.0)* ___ ___ / ___ ___ / ___ ___ ___ ___ | For Automation Carrier Route Rate Pieces, Enter Date of Address Matching and Coding *(DMM A950.3.0)* ___ ___ / ___ ___ / ___ ___ ___ ___ | |

Postage Computation (DMM P013)

For Automation Letters	Total From Part A *(On reverse)*	
For Automation Flats	Total From Part B *(On reverse)*	
For Nonautomation Letters, Flats, and Parcels	Total From Part C *(On reverse)*	
For Automation and Nonautomation Cards	Total From Part D *(On reverse)*	
For Special Services and Other Fees	Total From Attached Form 3540-S	
	Total Postage *(Add lines above)* →	

Rate at Which Postage Affixed *(Check one) (DMM P100)*
☐ Correct ☐ Lowest ☐ Neither

_____ pcs. x $ _____ . _____ = **Postage Affixed** →

Net Postage Due *(Subtract postage affixed from total postage)* →

For USPS Use Only: Additional Postage Payment *(State reason)*

Total Adjusted Postage *(Add additional payment to net postage due)* →

Certification

The mailer's signature certifies acceptance of liability for and agreement to pay any revenue deficiencies assessed on this mailing, subject to appeal. If an agent signs this form, the agent certifies that he or she is authorized to sign on behalf of the mailer, and that the mailer is bound by the certification and agrees to pay any deficiencies. In addition, agents may be liable for any deficiencies resulting from matters within their responsibility, knowledge, or control.

The mailer hereby certifies that all information furnished on this form is accurate, truthful, and complete; that the mail and the supporting documentation comply with all postal standards and that the mailing qualifies for the rates and fees claimed; and that the mailing does not contain any matter prohibited by law or postal regulation.

I understand that anyone who furnishes false or misleading information on this form or who omits information requested on this form may be subject to criminal and/or civil penalties, including fines and imprisonment. *Privacy Notice:* For information regarding our Privacy Policy visit *www.usps.com*.

Signature of Mailer or Agent	Name of Mailer or Agent	Telephone

USPS Use Only

Weight of a Single Piece 0 . ___ ___ ___ ___ pound

Is figure at left adjusted from mailer's entries? ☐ Yes ☐ No
If "Yes," Reason

Check One
☐ Presort Verification Not Scheduled ☐ Presort Verification Performed as Scheduled

I CERTIFY that this mailing has been inspected concerning: (1) eligibility for postage rates claimed; (2) proper preparation *(and presort where required)*; (3) proper completion of postage statement; and (4) payment of annual fee *(if required)*.

Round Stamp *(Required)*

Date Mailer Notified	Contact	By *(Initials)*

Verifying Employee's Signature	Verifying Employee's Name	Time AM PM

First-Class Mail — Postage Affixed

Presort / Automation Discounts	Rate	Number of Pieces	Total	Presort / Automation Discounts	Rate	Number of Pieces	Total
A Automation Rates — Letters *(DMM C810)*				**B** Automation Rates — Flats *(DMM C820)*			
A1 Carrier Route	_____ x	_____ pcs.	= $_____	**B1** 5-Digit	_____ x	_____ pcs.	= $_____
A2 5-Digit	_____ x	_____ pcs.	= $_____	**B2** 3-Digit	_____ x	_____ pcs.	= $_____
A3 3-Digit	_____ x	_____ pcs.	= $_____	**B3** ADC	_____ x	_____ pcs.	= $_____
A4 AADC	_____ x	_____ pcs.	= $_____	**B4** Mixed ADC	_____ x	_____ pcs.	= $_____
A5 Mixed AADC	_____ x	_____ pcs.	= $_____	**B5** Nonmachinable Surcharge *(For pieces 1 oz. or less; see DMM E130)*	.055 x	_____ pcs.	= $_____
Total — Part A *(Carry to front of form)*			$_____	**Total — Part B** *(Carry to front of form)*			$_____
C Nonautomation Rates — Letters, Flats, and Parcels *(DMM C050)*				**D** Cards Eligible for Card Rates *(DMM C100)*			
C1 Presorted	_____ x	_____ pcs.	= $_____	Automation Rates *(DMM C810)*			
C2 Single-Piece	_____ x	_____ pcs.	= $_____	**D1** Carrier Route	.170 x	_____ pcs.	= $_____
Nonmachinable Surcharge *(For pieces 1 oz. or less; see DMM E130)*				**D2** 5-Digit	.176 x	_____ pcs.	= $_____
C3 Presorted	.055 x	_____ pcs.	= $_____	**D3** 3-Digit	.183 x	_____ pcs.	= $_____
C4 Single-Piece	.120 x	_____ pcs.	= $_____	**D4** AADC	.187 x	_____ pcs.	= $_____
From Standard Mail *(DMM E620)*				**D5** Mixed AADC	.194 x	_____ pcs.	= $_____
C5 Single-Piece	_____ x	_____ pcs.	= $_____				
C6 Nonmachinable Surcharge *(For pieces 1 oz. or less; see DMM E130)* Single-Piece	.120 x	_____ pcs.	= $_____	Nonautomation Rates			
				D6 Presorted	.212 x	_____ pcs.	= $_____
				D7 Single-Piece	.230 x	_____ pcs.	= $_____
Total — Part C *(Carry to front of form)*			$_____	**Total — Part D** *(Carry to front of form)*			$_____